Form Code: PSS\_CVF



## COMMONWEALTH OF VIRGINIA **Department of Criminal Justice Services Private Security Services Section**P.O. Box 1300

Richmond, VA 23218

www.dcjs.virginia.gov/pss

Status Hotline (804) 786-1132 1-(877)-9STATUS

| PROPERTY COLLATERAL VERIFICATION FORM  |                        |                           |              |                             |       |                 |     |  |
|--|------------------------|---------------------------|--------------|-----------------------------|-------|-----------------|-----|--|
| Applicant Information:   |                        |                           |              |                             |       |                 |     |  |
| DCJS ID # 99-  | Name:                  |                           |              | First Name:                 |       |                 | MI: |  |
| Please Select Appropriate Category (s)   |                        |                           |              |                             |       |                 |     |  |
| Real Estate  | Certificate of Deposit |                           |              | Cash                        |       | Other*          |     |  |
| If pledging Certificates of Deposit, Cash or Real Estate please complete the appropriate section of this form. *All other forms of collateral must be approved by the Department. Please submit a detailed description of any other forms of collateral.   |                        |                           |              |                             |       |                 |     |  |
| PART I-REAL ESTATE   |                        |                           |              |                             |       |                 |     |  |
| <ul> <li>Please attach a Title Certificate Report for each individual property pledged as collateral (Form PSS_TCR). The certificate of title report must be completed by an insured title abstractor.</li> <li>A power of attorney must be attached for each property in which the applicant is not the sole owner.</li> <li>*You may attach a new appraisal or tax assessment if you choose to increase the amount of equity on file.</li> <li>If additional space is needed, you may photocopy this form and attach.</li> <li>Please list each individual property</li> </ul> |                        |                           |              |                             |       |                 |     |  |
| Discoing! Address of Duscourter.   | Please list            | each ind                  | iviauai proj | perty                       |       |                 |     |  |
| Physical Address of Property:  |                        |                           |              |                             |       |                 |     |  |
| *Value as reflected on appraisal or tax assessment:  |                        | Total Lien or Obliga      |              | ation: Total                |       | Equity Pledged: |     |  |
| \$   |                        | \$                        |              |                             | \$    |                 |     |  |
|  |                        |                           |              |                             |       |                 |     |  |
| Physical Address of Property:  |                        |                           |              |                             |       |                 |     |  |
| *Value as reflected on appraisal or tax assessment:  |                        | Total Lien or Obligat     |              | tion: Total                 |       | Equity Pledged: |     |  |
| \$   |                        | \$                        |              | \$                          |       |                 |     |  |
|  |                        |                           |              |                             |       |                 |     |  |
| Physical Address of Property:  |                        |                           |              |                             |       |                 |     |  |
| *Value as reflected on appraisal or tax assessment:<br>\$  |                        | Total Lien or Obligation: |              | Total Equity Pledged:<br>\$ |       |                 |     |  |
|  |                        |                           |              |                             |       |                 |     |  |
| Physical Address of Property:  |                        |                           |              |                             |       |                 |     |  |
| *Value as reflected on appraisal of  | or tax assessment:     | Total Lie                 | en or Obliga | tion:                       | Total | Equity Pledged: |     |  |
| \$   |                        | \$                        |              | \$                          |       |                 |     |  |
|  |                        |                           |              |                             |       |                 |     |  |

Form Code: PSS\_CVF

| PART II-CERTIFICATE OF DEPOSIT  |   |                         |                   |  |  |  |  |
|---|---|-------------------------|-------------------|--|--|--|--|
| Please attach a copy or   | must be issued by an FDIC-insured<br>f your most recent financial stateme<br>is on the Account, please attach a I | nt verifying the amount |                   |  |  |  |  |
| Name(s) on Account or Payee of  | of Security (as it reads on CD):  |                         |                   |  |  |  |  |
| Name and Address of Financial   | Institution:  |                         |                   |  |  |  |  |
| Amount of Security:   | Amount Pledged for Bonding:   | First Maturity Date:    | ID Number of CD:  |  |  |  |  |
| PART III-CASH -   |   |                         |                   |  |  |  |  |
| Please attach a copy or   | ling purposes must be held by an FI f your most recent financial stateme is on the Account, please attach a I     | nt verifying the amount | -                 |  |  |  |  |
| Name and Address of Financial   | Institution:  |                         |                   |  |  |  |  |
| Type of Account   | Account #   |                         | Amount Available: |  |  |  |  |
|   | Affi  | davit                   |                   |  |  |  |  |
| I, the undersigned, certify that all information contained on this form and attachments is true, correct, and complete to the best of my knowledge and I have not omitted any pertinent information. I understand that any misrepresentation, falsification or omission of pertinent or material information may be cause for denial or revocation and may result in civil or criminal penalties.  To the best of my knowledge, the total amount of equity in the real estate and/or other collateral at the time of submission of this affidavit is \$ |   |                         |                   |  |  |  |  |
| Notary:   |   |                         |                   |  |  |  |  |
|   | Commonwealth of County/City:  |                         |                   |  |  |  |  |
|   | before me thisday of  |                         |                   |  |  |  |  |
| My Commission Expire  | es:   |                         |                   |  |  |  |  |
|   |   | Date:                   |                   |  |  |  |  |